



THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Patent Application of

COLLA et al.

Atty. Ref.: 4398-320

Serial No. 10/785,193

TC/A.U.: 3743

Filed: February 25, 2004

Examiner: Teena Kay Mitchell

For: FAULT DIAGNOSIS IN CPAP AND NIPPV DEVICES

* * * * *

November 14, 2005

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

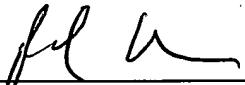
SUBMISSION OF SUBSTITUTE DECLARATION

Please substitute the attached Declaration for the Declaration originally filed with the application, as requested by the Examiner.

Respectfully submitted,

NIXON & VANDERHYE P.C.

By: _____


Paul T. Bowen
Reg. No. 38,009

PTB:jck
901 North Glebe Road, 11th Floor
Arlington, VA 22203-1808
Telephone: (703) 816-4000
Facsimile: (703) 816-4100

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Atty Dkt. 4398-320
C# M#
FC/A.U. 3743
Examiner: Teena Kay Mitchell
Date: November 14, 2005

NOV 14 2005
14938
PATENT & TRADEMARK OFFICE

Serial No. 10/785,193
Filed: February 25, 2004
Title: FAULT DIAGNOSIS IN CPAP AND NIPPV DEVICES

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

RESPONSE/AMENDMENT/LETTER

This is a response/amendment/letter in the above-identified application and includes an attachment which is hereby incorporated by reference and the signature below serves as the signature to the attachment in the absence of any other signature thereon.

Correspondence Address Indication Form Attached.

Fees are attached as calculated below:

Total effective claims after amendment previously paid for	22	minus highest number (at least 20) =	0	x \$50.00	\$0.00 (1202)/\$0.00 (2202)	\$	
Independent claims after amendment previously paid for	4	minus highest number (at least 3) =	0	x \$200.00	\$0.00 (1201)/\$0.00 (2201)	\$	
If proper multiple dependent claims now added for first time, (ignore improper); add						\$360.00 (1051)/\$180.00 (2051)	
Petition is hereby made to extend the current due date so as to cover the filing date of this paper and attachment(s)						One Month Extension \$120.00 (1251)/\$60.00 (2251)	
						Two Month Extensions \$450.00 (1252)/\$225.00 (2252)	
						Three Month Extensions \$1020.00 (1253)/\$510.00 (2253)	
						Four Month Extensions \$1590.00 (1254)/\$795.00 (2254)	\$ 120.00
Terminal disclaimer enclosed, add						\$130.00 (1814)/ \$65.00 (2814)	\$
<input type="checkbox"/> Applicant claims "small entity" status. <input type="checkbox"/> Statement filed herewith							
Rule 56 Information Disclosure Statement Filing Fee						\$180.00 (1806)	\$
Assignment Recording Fee						\$40.00 (8021)	\$
Other:							\$
						TOTAL FEE ENCLOSED \$ 120.00	

The Commissioner is hereby authorized to charge any deficiency, or credit any overpayment, in the fee(s) filed, or asserted to be filed, or which should have been filed herewith (or with any paper hereafter filed in this application by this firm) to our Account No. 14-1140. A duplicate copy of this sheet is attached.

901 North Glebe Road, 11th Floor
Arlington, Virginia 22203-1808
Telephone: (703) 816-4000
Facsimile: (703) 816-4100
PTB:jck

NIXON & VANDERHYE P.C.
By Atty: Paul T. Bowen, Reg. No. 38,009

Signature: _____